

SCHOOL DISTRICT BID PROPOSAL FORM

TO SCHOOL BOARD OF _____

We submit the following bid proposal for serving as the deposit for _____ School District for the period beginning July 1, _____ and ending June 30, _____ and thereafter until new arrangements shall be made according to law:

1. _____ is insured by the Federal Deposit Insurance Corporation or any successors to such insurance corporation.
 2. _____ has met the primary capital to assets ratio of five and one-half percent (5 1/2%) or more as of June 30, _____, and has received certification of such from the State Treasurer. **Please attach commission in response.**
 3. _____ has _____ offices located in _____, Mississippi. **Please attach in response a list of all branches located in the county the school district is located. Include address of each branch.**
 4. _____ has _____ employees located in _____, Mississippi.
 5. _____ agrees to place on deposit for the _____ School District as security with the State Treasurer any of the securities eligible for securing of state funds as provided in Section 27-105-5, Mississippi Code Ann. (1972) in an amount at least equal to one hundred five percent (105%) of the maximum sum to be placed on deposit in such financial institution at any one time exclusive of that portion of accounts insured by the Federal Deposit Insurance Corporation or any successors to such insurance corporation.
- Or, _____ is a public funds guaranty pool member under sections 27-105-5 and 27-105-6, Mississippi Code Ann. (1972). The qualified financial institution shall secure those deposits by placing qualified securities on deposit with the State Treasurer as provided in section 27-105-5.
6. _____ agrees to execute a Collateral Security Agreement with the District in the form recommended by the State Treasurer of the State of Mississippi for the purpose of complying with Section 1823(e) of FIRREA as necessary to ensure that the District will possess a preferred claim to pledged securities in the event of default by the depository bank. All Collateral Security Agreements will be executed prior to July 1, _____.
 7. _____ agrees to monitor monthly deposits of the district in order to ensure adequate securities are pledged and to provide the district with an annual report listing accounts reported to the State Treasurer.

8. _____ agrees to prepare monthly statements beginning with the first day of the month and ending with the last day of the month, showing debits, credits, balances, and sequential listing of cashed checks within five (5) business days of the statement closing date.
9. _____ agrees to pay interest on the District's accounts based on a fixed rate or variable rate. Variable rates shall be equal to the prior month-end U.S. Target Federal Funds Rate plus or minus _____ basis points. Current U.S. Target Federal Funds Rate is _____.

CURRENT RATES BASED ON ABOVE CALCULATIONS

	<i>Variable</i>	<i>Fixed</i>
<i>DDA Checking Accounts</i>	_____ %	_____ %
<i>Money Market/Savings Accounts</i>	_____ %	_____ %

Note: Interest shall be earned on the average daily investable balance.

10. _____ agrees to provide earnings allowance on daily District account balances that offset bank service charges. The earnings credit rate (ECR) shall be _____ %
11. _____ agrees to, if requested, offer advice on cash management and investment strategies necessary to properly utilize the School District's assets.
12. _____ agrees to provide the requested information necessary for the completion of the annual audit at no charge to the district or its auditors.
13. _____ agrees to allow the district to establish or maintain checking or savings accounts for no charge or minimum charges/fees for deposits credited, checks paid, incoming wire transfers, or returned deposit items. In addition, _____ agrees to provide the services listed on the following page at no charge or minimum charge to the district based on account data provided by the school district and data listed below:

Account Data	
<i>Average Monthly Ledger Balance</i>	
<i>Number of DDA Checking Accounts</i>	
<i>Number of Savings Accounts</i>	

Completed By School District			Financial Institution's Response	
Account Services	Services Utilized? (Yes/No/Interested)	Monthly Average Volume	Provided at No Charge (Yes or No)	Direct Fee or Service Charge (Indicate Fee or Charge)
Stop Payments	Choose a response.		Choose an item.	
Outgoing Wire Transfers	Choose a response.		Choose an item.	
Incoming Wire Transfers	Choose a response.		Choose an item.	
Night Depository Services	Choose a response.		Choose an item.	
Locking Bank Bags	Choose a response.		Choose an item.	
Keys for bank night drop	Choose a response.		Choose an item.	
Deposit Slips	Choose a response.		Choose an item.	
Checks	Choose a response.		Choose an item.	
Re-deposit of returned deposit items at least once	Choose a response.		Choose an item.	
Research/Statement Reproduction	Choose a response.		Choose an item.	
Payroll Direct Deposit Services	Choose a response.		Choose an item.	
Transactions handled via phone	Choose a response.		Choose an item.	
Cash in to be counted by teller at time of deposit	Choose a response.		Choose an item.	
Internet Banking Access	Choose a response.		Choose an item.	
Overdraft Fees and Penalties	Choose a response.		Choose an item.	
Positive Pay	Choose a response.		Choose an item.	
Reconciliation	Choose a response.		Choose an item.	
Controlled Disbursements	Choose a response.		Choose an item.	
Stored Value (Payroll) Cards	Choose a response.		Choose an item.	
Lockbox Services	Choose a response.		Choose an item.	
Check to ACH Conversion	Choose a response.		Choose an item.	
Balance and Transaction Services	Choose a response.		Choose an item.	
Note: Please add any additional services you deem necessary or have interest in under "Service" column				
	Choose a response.		Choose an item.	
	Choose a response.		Choose an item.	
	Choose a response.		Choose an item.	
	Choose a response.		Choose an item.	
	Choose a response.		Choose an item.	
	Choose a response.		Choose an item.	
	Choose a response.		Choose an item.	
	Choose a response.		Choose an item.	
	Choose a response.		Choose an item.	

14. _____ agrees to provide ledger credit on the same day as deposits occur (holidays and weekends excluded). This includes same day credit on wire transfer of funds from the federal and state government, and same day credit on deposits made by the District prior to 2:00 P.M. CST.

Financial Institution Name: _____

Primary Contact Name: _____

Telephone Number: _____

Street Address: _____

City, State, Zip Code: _____

Email Address: _____

Type or Print Name: _____

Authorized Signature: _____

Title: _____

Date: _____